

ASS. REC. BY:

REF: CS/EG I 20003602/Gtf3

Special Instruction:

Surveyor: Sun Pin

ASSIGNMENT (Office)

From (Person): Pauline Soh

of

Ergo

Date/Time: 5.3.2020 10.35a.m

Estimated Cost:

Bill to:

OD/TP/WS/TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No:

SHB 2614

Insured:

SMH 4239G

at Workshop m/s

SMRT

Tel:

68662671

of 60 Woodland Industrial Ave E4

Policy No:

Claim No:

CDMPG 20000339

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A. 23/02/2020

CA / REV / REP. / REV 24 HRS

Date/Time: 5/3/2020 11.28a.m

Person Contacted:

Shanti

H.O.D. Endorsement:

Vehicle IN/OUT

| Date/Time | Action/Instruction (✓) Estimate |
|-----------|---------------------------------|
|           | SHB 2614 - NA/FCI 19020186/24   |
|           | SMH 4239G - X                   |
|           |                                 |
| 6/3       | Submit 1A via menmen            |
|           |                                 |
|           |                                 |

REF: Ergo

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: \_\_\_\_\_

at Workshop m/s \_\_\_\_\_

of \_\_\_\_\_

Insured: \_\_\_\_\_

Policy No. \_\_\_\_\_

Claims No. \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its  
repair at the time of inspection.



Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: \_\_\_\_\_ days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: SHB 261H Yr Regn: 04/07/2014  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / (Taxi) Prime Mover /  
 Truck / Traller or

Make: Toyota Prius c.c 1795  
 Colour: Maroon A/C: Insured / Std / NI / NA  
 Sp. Reading: 448.209 T/Radio: Insured / Std / NI / NA  
 Eng/No: —  
 C/No: JTPKN366205746829

Gen. Cond: Good / Fair / Poor / Burnt  
Steering: In order / Jammed / Leaked / Burnt or  
Brake: In order / Jammed / Leaked / Burnt or  
Modl: Nil / S/Rlm / STD A/Rlm or  
Tyre Size: F: 195/65 R15  
R: 195/65 R15

BS/DUN/EXNOVA/GY/FS/LIZA/MIC/OHTSU/PIR/SUMI/  
TOYO/YOKO or Achilles

| Front                    | Rear                     |
|--------------------------|--------------------------|
| R/Bal. <u>5</u> mm       | R/Bal. <u>5</u> mm       |
| L/Bal. <u>5</u> mm       | L/Bal. <u>5</u> mm       |
| D.O.A. <u>03/02/2020</u> | D.O.I. <u>05/03/2020</u> |

Survey held at SMART  
Des. of Damages: Frt / Rear / O/S / (N/S) / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

[illegible]

Date/Time, File, Pass WZ. . . : Prell. Report

|    |  |                |
|----|--|----------------|
| 1) |  | : Final Report |
|----|--|----------------|

Date/Time, File Return to?

2)

Performed :

1. 4000 Euro / 1.6.1. / 12

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp (\$)

1: Interview (\$

☐ : Tech. Invs (S)

Weekend 18

Survey Fee:

Transportation:

$$S \rightarrow RS, \quad SI$$

Phylos

1. 0.0165

TOTAL

## Nivitha (LKK Auto)

**From:** ERGO Insurance Pte. Ltd. (Claims Department) <claims@ergo.com.sg>  
**Sent:** Thursday, 5 March 2020 10:35 AM  
**To:** Shanti B Thaiyal Nayagi (Auto Svcs/Claims & IA/Claims & IA/Taxis); Admin-D (LKKAuto (admin-d@lkkauto.com)); Admin A (admin-a@lkkauto.com); Mei Kwan (LKKAuto (Meikwan@lkkauto.com))  
**Cc:** Phoebe Xie; Zheng Hanyang  
**Subject:** RE: Claims ref no. (P) CDMPG20000339 SHB261H - Survey (Ergo)

Date Classification : Confidential, C3

**\*\* NOTE: Please create case, input our Claim ref no. and upload ALL survey related documents into Merimen. Payment invoices shall be ignored for cases that are not submitted via Merimen.**

Hi LKK,

Please conduct this survey request.

**(Note: Survey vehicle only, LOD will be handled by Ergo)**

Kindly inform us if you are not able to attend it.

Thank you.

Warmest Regards,  
Pauline Soh  
ERGO Insurance Pte. Ltd.

5 Temasek Boulevard, #04-05 Suntec Tower Five  
Singapore 038985  
DID.: +65 6829 9194  
[pauline.soh@ergo.com.sg](mailto:pauline.soh@ergo.com.sg)

[www.ergo.com.sg](http://www.ergo.com.sg)

# ERGO

ERGO is one of the major insurance groups in Germany and Europe. Worldwide, ERGO is represented in more than 30 countries and concentrates on Europe and Asia. ERGO is part of Munich Re (Group), one of the world's leading risk carriers.



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**From:** Shanti B Thaiyal Nayagi (Auto Svcs/Claims & IA/Claims & IA/Taxis) <BThaiyalN@smrt.com.sg>  
**Sent:** Thursday, 5 March 2020 10:18 am  
**To:** ERGO Insurance Pte. Ltd. (Claims Department) <claims@ergo.com.sg>  
**Cc:** Phoebe Xie <phoebe.xie@ergo.com.sg>; Zheng Hanyang <hanyang.zheng@ergo.com.sg>  
**Subject:** RE: Claims ref no. (P) CDMPG20000339 SHB261H - Survey (Ergo)

Dear Pauline,

Please refer to the preferred surveyors.

|     |                              |
|-----|------------------------------|
| LKK | LKK Auto Consultants Pte Ltd |
| VAC | Vicom Ltd                    |

Thank you & Regards

Shanti

SMRT Automotive Services PTE LTD

Accident Reporting Center (Claims Dept)

6866 2671/2 | [bthaiyaln@smrt.com.sg](mailto:bthaiyaln@smrt.com.sg)



---

**From:** ERGO Insurance Pte. Ltd. (Claims Department) [<mailto:claims@ergo.com.sg>]

**Sent:** 05/03/2020 10:09

**To:** Shanti B Thaiyal Nayagi (Auto Svcs/Claims & IA/Claims & IA/Taxis)

**Cc:** Phoebe Xie; Zheng Hanyang

**Subject:** Claims ref no. (P) CDMPG20000339 SHB261H - Survey (Ergo)

Date Classification : Confidential, C3

Dear Shanti,

We would like to conduct a PRI survey, please refer to our list of surveyors :

|   |     |  |
|---|-----|--|
| 1 | AIS | Automobile Inspection Services Pte Ltd |
| 2 | FTA | FormTeam Consultancy Pte Ltd           |
| 3 | IAS | Infiniti Appraisal Service             |
| 4 | JPk | JP Knights Pte Ltd                     |
| 5 | LBS | L.B.S Auto Consultants Pte Ltd         |
| 6 | LKK | LKK Auto Consultants Pte Ltd           |
| 7 | PS  | Priority Services                      |
| 8 | VAC | Vicom Ltd                              |

|    |      |                                  |
|----|------|----------------------------------|
| 9  | AJAX | AJAX Inspection Services Pte Ltd |
| 10 | AA   | Appraisal Associate              |

Warmest Regards,  
Pauline Soh  
ERGO Insurance Pte. Ltd.

5 Temasek Boulevard, #04-05 Suntec Tower Five  
Singapore 038985  
DID.: +65 6829 9194  
[pauline.soh@ergo.com.sg](mailto:pauline.soh@ergo.com.sg)

[www.ergo.com.sg](http://www.ergo.com.sg)

# ERGO

ERGO is one of the major insurance groups in Germany and Europe. Worldwide, ERGO is represented in more than 30 countries and concentrates on Europe and Asia. ERGO is part of Munich Re (Group), one of the world's leading risk carriers.



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**From:** Shanti B Thaiyal Nayagi (Auto Svcs/Claims & IA/Claims & IA/Taxis) <[BThaiyalN@smrt.com.sg](mailto:BThaiyalN@smrt.com.sg)>  
**Sent:** Wednesday, 4 March 2020 12:22 pm  
**To:** ERGO Insurance Pte. Ltd. (Claims Department) <[claims@ergo.com.sg](mailto:claims@ergo.com.sg)>  
**Cc:** Yeo Poh Suan (Auto Svcs/ARC/ARC/Taxis) <[YeoPohsuan@smrt.com.sg](mailto:YeoPohsuan@smrt.com.sg)>; Kok Tuck Foo (Auto Svcs/ARC/ARC/Taxis) <[TuckFoo@smrt.com.sg](mailto:TuckFoo@smrt.com.sg)>; Koo Yew Chung (Auto Svcs/ARC/ARC) <[YewChung@smrt.com.sg](mailto:YewChung@smrt.com.sg)>; Phua Zhi Yang (Auto Svcs/Ext Biz Svcs/AR & SC/ARC/AR) <[ZhiYang.Phua@smrt.com.sg](mailto:ZhiYang.Phua@smrt.com.sg)>; Grace Ng Siu Ching (Auto Svcs/ARC/ARC/Taxis) <[ngsiuching@smrt.com.sg](mailto:ngsiuching@smrt.com.sg)>; Lim Wei Siong (Auto Svcs/Claims & IA/Claims & IA/Taxis) <[weisiong@smrt.com.sg](mailto:weisiong@smrt.com.sg)>; Chin Kim Ming (Auto Svcs/ARC/ARC/Taxis) <[kimming.chin@smrt.com.sg](mailto:kimming.chin@smrt.com.sg)>  
**Subject:** RE: SHB261H - Survey (Ergo)

Dear Sir /Mdm,

Kindly arrange to survey the vehicle **SHB261H** within 48 hours according to GIA guide line, involving your insured **SMH4239G**

Insurance Company : **ERGO**  
Vehicle in **Woodlands. SMRT Depot**

***\*Please arrange LKK / VICOM to survey our taxi***

Regards  
Shanti  
SMRT Automotive Services PTE LTD  
Accident Reporting Center (Claims Dept)  
6866 2671/2 | [bthaiyaln@smrt.com.sg](mailto:bthaiyaln@smrt.com.sg)



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

|   |                                      |
|---|--------------------------------------|
| <b>Vehicle Owner Particulars</b>  |                                      |
| Owner ID Type:  | Company                              |
| Owner ID:   | 369K                                 |
| <b>Vehicle Details</b>  |                                      |
| Vehicle No.:  | SHB261H                              |
| Vehicle to be Exported:   | No                                   |
| Intended Deregistration Date:   | 06 Mar 2020                          |
| Vehicle Make:   | TOYOTA                               |
| Vehicle Model:  | PRIUS TAXI (SMRT)                    |
| Primary Colour:   | Maroon                               |
| Manufacturing Year:   | 2014                                 |
| Engine No.:   | 2ZR1383967                           |
| Chassis No.:  | JTDKN36U205746829                    |
| Maximum Power Output:   | 100.0 kW (134 bhp)                   |
| Open Market Value:  | \$32,920.00                          |
| Original Registration Date:   | 09 Jul 2014                          |
| First Registration Date:  | 09 Jul 2014                          |
| Transfer Count:   | 0                                    |
| Actual ARF Paid:  | \$8,088.00                           |
| <b>Intended PARF Rebate Details</b>   |                                      |
| PARF Eligibility:   | Yes                                  |
| PARF Eligibility Expiry Date:   | 08 Jul 2022                          |
| PARF Rebate Amount:   | \$5,661.00                           |
| <b>Intended COE Rebate Details</b>  |                                      |
| COE Expiry Date:  | 08 Jul 2022                          |
| COE Category:   | A - Car up to 1600cc & 97kW (130bhp) |
| COE Period(Years):  | 8                                    |
| PQP Paid:   | \$53,269.00                          |
| COE Rebate Amount:  | \$15,572.00                          |
| <b>Total Rebate Amount:</b>   | <b>\$21,233.00</b>                   |
| <b>Message</b>  |                                      |
| Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier. |                                      |

The information contained herein is correct as at 06 Mar 2020

OK

Note: This document has not been finalised.

**LKK Auto Consultants Pte Ltd** (Co.Reg.No:199607198R)

51 Ubi Ave 1 #01-25, Paya Ubi Industrial Park  
Singapore 408933

Tel: 6256-3561 Fax: 6844-8805 Email: sur@lkkauto.com; assignments@lkkauto.com

To: ERGO Insurance Pte. Ltd.  
5 Temasek Boulevard  
#04-01 Suntec Tower Five  
Singapore 038985

From: LKK Auto Consultants Pte Ltd  
51 Ubi Ave 1 #01-25  
Paya Ubi Industrial Park  
Singapore 408933

Attn:

Date: 06 Mar 2020

**Preliminary Advice**

|                    |   |                         |              |
|--------------------|---|-------------------------|--------------|
| Insured Vehicle No | : SMH4239G  | Accident Date           | : 23/02/2020 |
| TP Vehicle No      | : SHB261H   | Assignment Date         | : 05/03/2020 |
| Make               | : HONDA ACCORD  | Est. Duration of Repair | : 3.00       |
| Date of Inspection | : 05/03/2020  |                         |              |
| Inspection At      | : SMRT AUTOMOTIVE SERVICES PTE LTD (WOODLANDS)<br>60 WOODLANDS INDUSTRIAL PARK E4<br>SINGAPORE 757705 |                         |              |

**Point of Impact / General Description of Damages**

The vehicle sustained impact / damages N/S portion and parts claimed are consistent to the accident.

|                             |      |          |
|-----------------------------|------|----------|
| Repairer's Estimate (Gross) | :S\$ | 7,394.17 |
| Revised Amount              | :S\$ | 1,161.47 |
| Check Items (Estimated)     | :S\$ | 0.00     |
| Total                       | :S\$ | 1,161.47 |
| Lump Sum Repair             | :S\$ |          |

**Total Loss Consideration**

|                    |      |
|--------------------|------|
| New for Old Value  | :S\$ |
| Pre-Accident Value | :S\$ |
| COE / PARF Rebate  | :S\$ |
| Salvage Value      | :S\$ |
| Margin for Repair  | :S\$ |

**Remarks**

- ( ) The vehicle is repairable at our adjusted amount. We have also confirmed excess and policy coverage. Kindly let us have your authorisation.
- ( ) The vehicle is uneconomical to be repaired, you are advised to invite tender for the wreck.
- ( X ) Other comments : Survey on "WP"

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

### ACCIDENT STATEMENT

|                            |                  |
|----------------------------|------------------|
| Date Of Report             | 25/02/2020 15:21 |
| Date Of Accident           | 23/02/2020 13:25 |
| Exact Location Of Accident | BALESTIER ROAD   |
| Country/State of Loss      | SINGAPORE        |

### DETAILS OF OWN VEHICLE

|  |                                |
|--|--------------------------------|
| Vehicle Registration Number  | SHB261H                        |
| <b>Insured/Policyholder</b>  |                                |
| Name Of Registered Owner   | SMRT TAXIS PTE LTD             |
| Co Reg No  | 1XXXXX369K                     |
| Email Address  | NOEMAIL                        |
| Mobile Phone No  |                                |
| Alternative Phone No   | OFFICE-80000000                |
| <b>Vehicle Particulars</b>   |                                |
| Manufacturer   | TOYOTA                         |
| Model  | PRIUS TAXI-1.8 (A)             |
| Exact Purpose for which vehicle was being used at time of accident           | HIRE AND REWARD                |
| Are you claiming under your own insurance policy for repair to your vehicle? | NO                             |
| If No, Please state action to be taken                                       | THIRD PARTY                    |
| Vehicle Category   | TAXI                           |
| <b>Insurance Company</b>   |                                |
| Name of Insurance Company  | MS FIRST CAPITAL INSURANCE LTD |
| Type Of Coverage   | THIRD PARTY FIRE AND/OR THEFT  |
| Fleet Policy   | YES                            |
| Policy Number  | D-19093197MFSH                 |
| Cover Note Number  |                                |
| <b>Driver</b>  |                                |
| Name of Driver   | KARAM SINGH                    |
| NRIC No  | SXXXX227C                      |
| Date Of Birth  | 11/03/1957                     |
| Occupation   | OUTDOOR                        |
| Date Of Driving Pass   | 27/09/2011                     |
| Driving Experience   | 8 YEARS AND 4 MONTHS           |
| Gender   | MALE                           |
| Mobile Number  | (LOCAL) +65-80000000           |
| Fax Number   |                                |
| Contact Number   |                                |
| Email Address  | NOEMAIL                        |



Address 230  
 Postcode  
 Was driver an employee of the Insured's Company NO  
 If No, Relationship of the Driver with the Insured OTHER - HIRER  
 Vehicle Registration Number of Driver's Own Vehicle -  
 -  
 -  
 Insurance Company of Driver's Own Vehicle -  
 -  
 -

#### General Information of the Accident

Type Of Accident SIDE SWIPE  
 Weather Conditions CLEAR  
 Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident? NO  
 Number of vehicles (including own vehicle) involved in the accident 2  
 Was any body injured in the Accident? NO  
 Was any injured conveyed to hospital by ambulance? NO  
 Was any other material or property damaged? YES  
 I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO  
 Number of Passengers (Including Driver) 3

Passenger 1 NAME: : MONIR  
 GENDER: : MALE  
 Passenger 2 NAME: : UNKNOWN  
 GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police? NO  
 If Yes, Please state which Police Station  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

#### Circumstances of Accident

REFER TO STATEMENT - THERE WAS AN ACCIDENT IN FRONT OF CEYLON SPORTS CLUB, BETWEEN A CAR AND MOTORCYCLE. AMBULANCE WAS ALSO PARKED NEXT TO THEM AS THEY WERE ATTENDING TO A MAN LYING ON THE ROAD. DUE TO THIS THE WHOLE BALESTIER ROAD WAS JAM WITH VEHICLES AND VERY SLOW MOVING. AS I WAS AT THE EXTREME RIGHT LANE, OUR LANE VEHICLES WERE MOVING SLOWLY AND OTHERS WERE NOT. AS WE WERE MOVING SLOWLY THIRD PARTY TRIED TO SWAY INTO MY LANE BUT HIT INTO MY CAR

#### Attachment(s)

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? NO  
 Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMH4239G  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category PRIVATE CAR  
 Name of Driver DARREN  
 NRIC/Passport Number  
 Contact Number

Address

Postcode

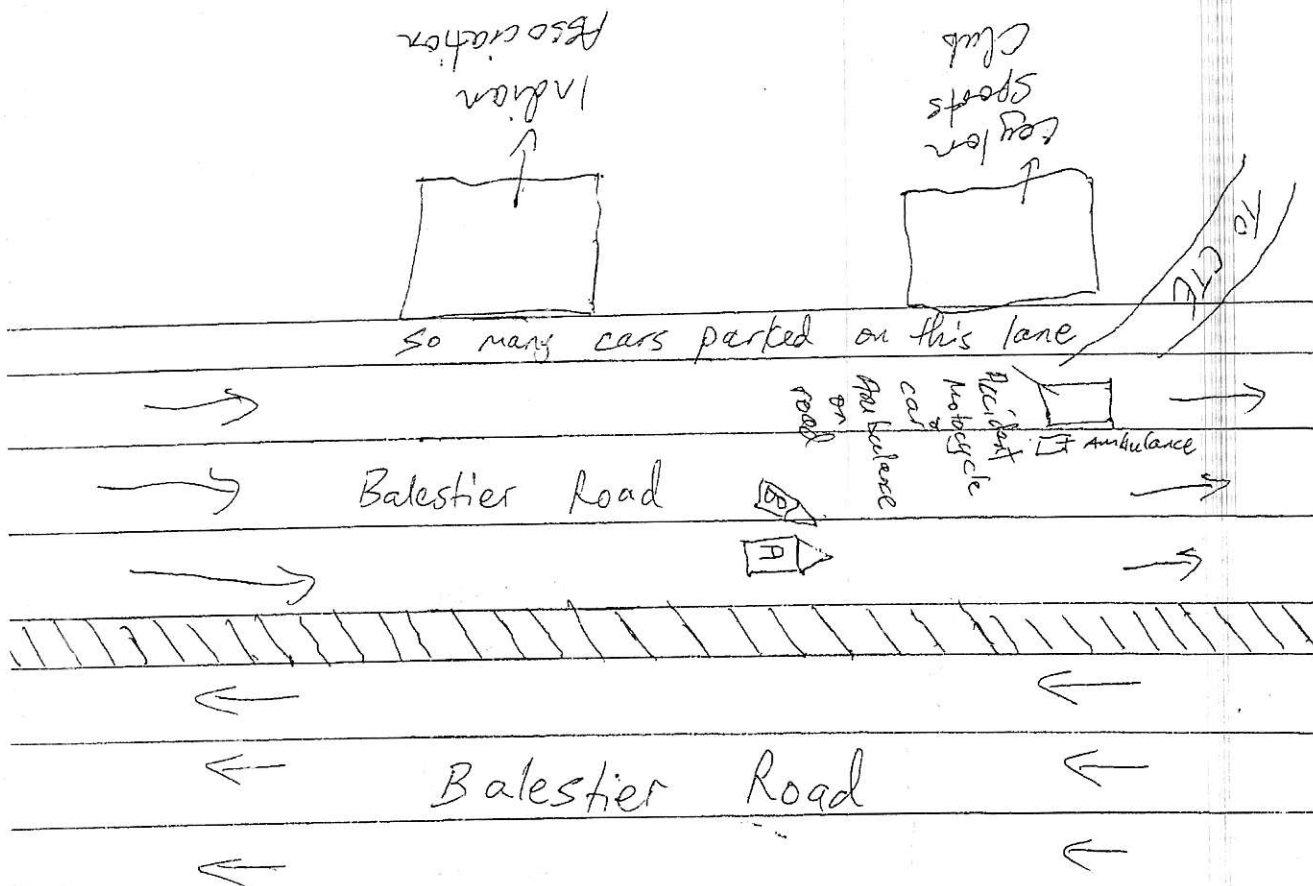
Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

## Sketch Plan Pg. 1

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or printed text on the paper.

## DECLARATION

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature \_\_\_\_\_  
Date & Time: \_\_\_\_\_

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

## Sketch Plan Pg. 2

### SKETCH PLAN

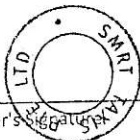
#### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature  
Date & Time:



Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

*Ch* 25/7/2022



## Case Details

Case Reference Number : TAX/02/20/2078  
 Type of Repair : Accident Repair  
 Vehicle Registration Number : SHB261H

Company Type : SMRT Taxis Pte Ltd  
 Estimation ID : EST-10726-ID  
 Assigned By : Taxi Claims Manager Team

Insurance Company Name : ERGO Insurance Pte Ltd  
 Accident Date and Time : 23/02/2020 05:25 AM  
 Vehicle Age(In Months) : 67

## Documents / Photographs

[View Documents / Photographs](#)

Total Documents: 1

## Estimation Details

### Spare Part's Cost Detail

| SMRT Recommendation   |              |         |                 |                              |     |                         |                |        |                 |                        | Surveyor Approval |                          |                |         |
|-----------------------|--------------|---------|-----------------|------------------------------|-----|-------------------------|----------------|--------|-----------------|------------------------|-------------------|--------------------------|----------------|---------|
| BOM Type              | Costing Type | Portion | Material Number | Part Name                    | Qty | List Price Per Unit(\$) | List Price(\$) | Dis(%) | Final Price(\$) | Repair/ Replace        | Surveyor Quantity | Surveyor Final Price(\$) | Repair/Replace | Remarks |
| One Time Key In       | Main         |         |                 | BUMPER FRT                   | 1   | 482.00                  | 482.00         | 25.00  | 361.50          | Replace                | 1                 | 0                        | Repair         | X R     |
| One Time Key In       | Main         |         |                 | BUMPER CLIPS                 | 10  | 1.61                    | 16.10          | 25.00  | 12.08           | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| One Time Key In       | Main         |         |                 | BUMPER SUPPORT F/RH          | 1   | 76.40                   | 76.40          | 25.00  | 57.30           | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| One Time Key In       | Main         |         |                 | BUMPER SUPPORT F/LH          | 1   | 76.40                   | 76.40          | 25.00  | 57.30           | Replace                | 0                 | 0                        | Check          | X SVC   |
| One Time Key In       | Main         |         |                 | BUMPER ENERGY ABSORBER FRT   | 1   | 78.80                   | 78.80          | 25.00  | 59.10           | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| One Time Key In       | Main         |         |                 | BUMPER REINFORCEMENT FRT     | 1   | 498.40                  | 498.40         | 25.00  | 373.80          | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| One Time Key In       | Main         |         |                 | ARM SUB-ASSY,FR BUMPER LH    | 1   | 250.40                  | 250.40         | 25.00  | 187.80          | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| One Time Key In       | Main         |         |                 | ARM SUB-ASSY,FR BUMPER RH    | 1   | 250.40                  | 250.40         | 25.00  | 187.80          | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| One Time Key In       | Main         |         |                 | BUMPER GRILLE SUB-ASSY,LOWER | 1   | 311.10                  | 311.10         | 25.00  | 233.33          | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| One Time Key In       | Main         |         |                 | LENS & BODY,FR TURN LH       | 1   | 511.80                  | 511.80         | 10.00  | 460.62          | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| Total Spare Part Cost |              |         |                 |                              |     |                         |                |        | 4,793.17        | Surveyor Total 581.47  |                   |                          |                |         |
| Lump Sum Discount (%) |              |         |                 |                              |     |                         |                |        | 0.00            | Lump Sum Dis (%) 20    |                   |                          |                |         |
| Final Spare Part Cost |              |         |                 |                              |     |                         |                |        | 4,793.17        | Final Sur Total 465.18 |                   |                          |                |         |

| SMRT Recommendation   |              |         |                 |                               |     |                         |                |        |                 |                        | Surveyor Approval |                          |                |         |
|-----------------------|--------------|---------|-----------------|-------------------------------|-----|-------------------------|----------------|--------|-----------------|------------------------|-------------------|--------------------------|----------------|---------|
| BOM Type              | Costing Type | Portion | Material Number | Part Name                     | Qty | List Price Per Unit(\$) | List Price(\$) | Dis(%) | Final Price(\$) | Repair/ Replace        | Surveyor Quantity | Surveyor Final Price(\$) | Repair/Replace | Remarks |
| One Time Key In       | Main         |         |                 | LENS & BODY, FR TURN RH       | 1   | 511.80                  | 511.80         | 10.00  | 460.62          | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| One Time Key In       | Main         |         |                 | BUMPER LIP FRT                | 1   | 139.60                  | 139.60         | 25.00  | 104.70          | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| One Time Key In       | Main         |         |                 | BUMPER FRT ABSORBER LOWER     | 1   | 127.70                  | 127.70         | 25.00  | 95.78           | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| One Time Key In       | Main         |         |                 | UNDER COVER CENTER            | 1   | 448.30                  | 448.30         | 25.00  | 336.23          | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| One Time Key In       | Main         |         |                 | MIRROR ASSY,LH                | 1   | 1,224.90                | 1,224.90       | 25.00  | 918.68          | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| One Time Key In       | Main         |         |                 | MIRROR LAMP LH                | 1   | 65.30                   | 65.30          | 10.00  | 58.77           | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| One Time Key In       | Main         |         |                 | COVER, OUTER MIRROR, LH       | 1   | 107.40                  | 107.40         | 25.00  | 80.55           | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| One Time Key In       | Main         |         |                 | FENDER FRT/LH                 | 1   | 723.40                  | 723.40         | 25.00  | 542.55          | Replace                | 1                 | 542.55                   | Replace        | / PD    |
| One Time Key In       | Main         |         |                 | NAME PLATE (HYBRID)           | 1   | 51.90                   | 51.90          | 25.00  | 38.92           | Replace                | 1                 | 38.92                    | Replace        | / Nec   |
| One Time Key In       | Main         |         |                 | FENDER LINER FRT/LH           | 1   | 171.70                  | 171.70         | 25.00  | 128.77          | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| One Time Key In       | Main         |         |                 | FENDER LINER PAD, FR WHEEL RH | 1   | 49.30                   | 49.30          | 25.00  | 36.97           | Replace                | 0                 | 0                        | Not Give       | X SVC   |
| Total Spare Part Cost |              |         |                 |                               |     |                         |                |        | 4,793.17        | Surveyor Total 581.47  |                   |                          |                |         |
| Lump Sum Discount (%) |              |         |                 |                               |     |                         |                |        | 0.00            | Lump Sum Dis (%) 20    |                   |                          |                |         |
| Final Spare Part Cost |              |         |                 |                               |     |                         |                |        | 4,793.17        | Final Sur Total 465.18 |                   |                          |                |         |

Labour's Cost Detail

| S.No.  | Costing Type | Job Scope                  | SMRT Recommendation(\$) | Surveyor Adjustment(\$) | Remarks |
|--------|--------------|----------------------------|-------------------------|-------------------------|---------|
| 1      | Main         | TO REPAIR FRONT LH PORTION | 507.00                  | 300                     | /       |
| Total: |              |                            | 507.00                  | 300.00                  |         |

Spray Cost Detail

| S.No. | Costing Type | Job Scope | SMRT Recommendation(\$) | Surveyor Adjustment(\$) | Remarks |
|-------|--------------|-----------|-------------------------|-------------------------|---------|
|-------|--------------|-----------|-------------------------|-------------------------|---------|

| S.No.         | Costing Type | Job Scope                            | SMRT Recommendation(\$) | Surveyor Adjustment(\$) | Remarks |
|---------------|--------------|--------------------------------------|-------------------------|-------------------------|---------|
| 1             | Main         | TO REPSRAY FRONT BUMPER              | 378.00                  | 200                     | ✓       |
| 2             | Main         | TO RESPRAY FRONT BUMPER LOWER GRILLE | 180.00                  | 0                       |         |
| 3             | Main         | RESPRAY MIRROR COVER LH              | 378.00                  | 0                       |         |
| 4             | Main         | TO RESPRAY FRONT FENDER LH           | 378.00                  | 200                     | ✓       |
| 5             | Main         | TO RESPRAY RIM                       | 180.00                  | 50                      | ✓       |
| <b>Total:</b> |              |                                      | <b>1,494.00</b>         | <b>450.00</b>           |         |

**Other Cost Detail**

| S.No.         | Costing Type | Job Scope                                       | SMRT Recommendation(\$) | Surveyor Adjustment(\$) | Remarks |
|---------------|--------------|---|-------------------------|-------------------------|---------|
| 1             | Main         | TO REMOVE AND REFIX WING MIRROR                 | 120.00                  | 0                       |         |
| 2             | Main         | TO REMOVE AND REFIT TYRE RIM (SPRAYING PURPOSE) | 120.00                  | 30                      | ✓       |
| 3             | Main         | TO DO WHEEL ALIGNMENT / TYRE BALANCING          | 120.00                  | 50                      | ✓       |
| 4             | Main         | TO REPLACE SUNDRY PARTS                         | 100.00                  | 20                      | ✓       |
| 5             | Main         | TO CHECK WIRING AND SYSTEM FUNCTION             | 80.00                   | 30                      | ✓       |
| 6             | Main         | TO WASH AND VACUUM                              | 60.00                   | 0                       |         |
| <b>Total:</b> |              |   | <b>600.00</b>           | <b>130.00</b>           |         |

**Summary**

|                          | Estimator Assesment(\$) | Surveyor Assesment(\$) |
|--------------------------|-------------------------|------------------------|
| Total Spare Part Detail  | 4,793.17                | 465.18                 |
| Total Labour Cost        | 507.00                  | 300.00                 |
| Total Spray Painting     | 1,494.00                | 450.00                 |
| Other                    | 600.00                  | 130.00                 |
| Overall Total            | 7,394.17                | 1,345.18               |
| Lump Sum Repair Option   |                         | ✓                      |
| Lump Sum Total           | 7,400.00                | 1,350.00               |
| Surveyor Approved Amount |                         | 1,350.00               |

## Estimator Assesment(\$)

## Surveyor Assesment(\$)

No of Repair Days\*

5

3

Remarks

Lump Sum Repair, After paint photo.

Surveyor Name

Sun Pin (LKK)

Signature

8381.00

Save

Clear

Survey Date

05/03/2020

- LKK Auto Consultants hence notify the Repairer of the following:
- To resurvey before/after spray painting
  - To display damaged part(s) during resurvey
  - Parts prices are subject to confirmation
  - Third party survey is on a "Without Prejudice" basis
  - No illegal modification(s) is allowed
  - Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date: